

CFBHPP Committee Meeting
Meeting Summary
February 8, 2007
Conference Room C – Henrico CSB
Glen Allen

I. Welcome and Introductions **Vicki Hardy-Murrell**

Vicki opened the meeting requesting committee members to introduce themselves.

II. Approval of Minutes **Vicki Hardy-Murrell**

Catherine moved approval of minutes with amendments, Malcolm seconded, minutes approved.

III. Bright Futures **Cathy Bodkin, VDH**

Pertinent points from the presentation:

- The AAP is under contract to revise Bright Futures materials. Practice guidelines will not be revised however major guidelines will be coming out soon.
- The intent of the revisions is to look at health and wellness promotion. Common language that would allow for communication across disciplines, strengths-based approach, developmental approach, birth to age 21 related to child development.
- The materials will focus on the child growing up in a family in the community. Several pediatric centers were involved in the development of the materials. Looking at how communities can be involved in an active way. The philosophy carries through as the guidelines are revised.
- Especially important that there is an emphasis on adolescents and assisting them to become informed health care consumers.
- Core messages: prevention works, families matter, and health is everyone's business.
- Core concepts: partnerships, communication, health promotion, time management, education, and advocacy.
- Bright Futures as the standard of care for Virginia's children and adolescents has been adopted by Virginia Department of Health, Virginia Department of Education, and the Virginia Department of Medical Assistance Services.
- Trainings have occurred extensively with VDH Nurses and social workers, WIC staff and community nutritionists, dentists and dental associations,

school nurses, home visitors (Resource Mothers, CHIP, and Healthy Families) and child care providers.

- Collaborative Projects include the Governor's New Parent Kit, Child Care Provider Kits, SOLs for Health Education, pilot training on mental health for DSS, CSBs, and VDH, perinatal depression web course-UVA, and DVD encouraging teen girls to participate in their own health care "Girls Empowered for Bright Futures".
- For all health care providers, VDH in collaboration with VCU/MCV and other partner organizations has developed a Bright Futures web site.
- HRSA has conducted an evaluation of National Bright Futures Implementation and has studied Virginia around issues of implementation, breadth of dissemination, extent of collaboration, identified needs for ongoing training, integration of policy into practice at the local level, outcomes, and family-friendly materials.
- Bright Futures National Projects: Family Voices booklet, AAP revisions to books, mental health brochures with Georgetown University, case studies, and a Bright Futures Health Promotion workgroup focused on educator curriculum (web and text book), learner curriculum, and video.

IV. CCCA

Don Roe

The committee watched a video tour about the Commonwealth Center for Children and Adolescents. The video was a response to families' concerns about placing their children in a state hospital, to answer their questions and to allay fears about what would happen to their child once he or she was placed. The goal of the video is to inform families, to give them an idea of who CCCA serves, etc. Copies will be made and disseminated to the committee and to CSBs, private providers, special education directors, etc.

V. Governor's Budget and OCFS Report

Shirley Ricks

OCFS is working with the VACSB to highlight children at the May VACSB conference. The conference will be held in Portsmouth. Shirley asked for suggestions for speakers, to prioritize children's issues.

Shirley told the committee that the OCFS is finalizing the draft report for the System of Care Projects for internal review by the Department. Shirley noted that the data in the report does not reflect the number of children served and that it will be released in the near future.

Fellowship stipends for psychologists and psychiatrists and continuation of the MH/DJJ sites are included in the Department's budget.

Mental Health Law Reform –Dates for committee meetings will be posted on the Department's web site. The Commission has modified the timetable for the Commission's work from October 2007 to sometime in 2008. The timeframe has been

adjusted to address concerns raised by some members of the GA about the scope of work, the Commission's charge, and timing of its work. Final reports from each task force will be delivered to the Commission in November. The children's task force has 3 subcommittees that continue to meet to address children's issues. The three subcommittees are: Juvenile Justice, Services and Custody Relinquishment, and Involuntary Commitment. The full task force on Children and Adolescents will meet March 2 at the Supreme Court Building.

VI. Committee Reports

Adolescent Substance Abuse Services Malcolm King

Adolescent subcommittee is moving forward ensuring recommendations are comprehensive and that substance abuse services are funded and include a broad range of services and not just treatment and services provided help families understand the system and the system understand family needs. Dates for Knowledge and Exposure Trainings are scheduled, in Charlottesville Feb 28th and in Danville March 6th. The location for the March training has not been finalized.

Virginia Federation of Families Vicki Hardy-Murrell

Vicki has been traveling around the state promoting the Federation of Families with the intention of strengthening the Federation as a statewide system of full family participation at all levels. Shirley solicited support from the committee to sustain the efforts of the Federation either financially or in-kind. The Federation needs paid staff and collaboration to strengthen family support and involvement.

Save the Date: SOC Conference scheduled September 16-18 at the Hotel Roanoke. Agenda committee heard a recommendation for a session related to training families and supports to be effective advocates. There was further discussion about strategies beyond what is planned for the conference. The committee is trying to bring to life COY evidence-based practices and to align these practices with SOC principles.

Juvenile Justice-Related Recommendations Joanne Smith

Joanne presented the draft report of the Juvenile Justice-Related Recommendations were presented to the Committee for June 2007 CFBHPP report to the Commissioner. Pertinent points from the report:

1. DJJ-MH Projects:
 - Mandate the completion of evaluation of the pilot program and establish programmatic standards.
 - Expand the program to cover all twenty-four juvenile detention centers throughout the Commonwealth

- Insure community System of Care resources are available to juvenile justice clients regardless of their ability to pay.
- 2. Mandate a report to the General Assembly to ensure compliance with standards pursuant to HB 2245 and SB 843 passed by the 2005 General Assembly requiring coordination and delivery of mental health/substance abuse services to juveniles transitioning from juvenile correctional centers or post-dispositional detention programs.
- 3. Some juveniles in JDCs and DJJ facilities need long-term secure psychiatric treatment. There are no public or private psychiatric beds in Virginia to provide security, safety and supervision for these youth and to maintain staff safety. Recommend a feasibility study for establishing forensic units in existing secure facilities or in newly constructed state facilities.

VII. 2007 Legislative Session

**Shirley Ricks
Kim McGaughey**

- HB 2150; clarifies that foster care services means the provision of services to a child and his family when the child has been identified as needing services to prevent or eliminate the need for custody relinquishment.
- HB 1925; Psychiatric inpatient treatment of minors clarifies that retired judges, substitute judges and special justices are authorized to perform hearings and to receive compensation.
- HB 2530; clarifies that retired judges, substitute judges, and special justices are authorized to perform hearings.
- SB 738; clarifies that retired judges, substitute judges, and special justices are authorized to perform hearings, to receive compensation, and to complete a training program.
- SB 1269; Psychiatric inpatient treatment of minors act allows for retired judges, substitute judges, and special justices are authorized to perform hearings and to receive compensation. This bill has been incorporated into SB 738.
- HB 2620; Community policy and management teams; the bill adds children requiring mental health services to prevent placement in foster care to the target population.
- SB 1332 expands mental health services as a mandated service under CSA. Budget language in the Department's budget will come from non-mandated funds and transferred to CSA. This will reduce the funding to CSBs for non-mandated services. Budget request has been submitted. A great deal of discussion has occurred about where will the funding come from. Background; this implements the AG's opinion, intent to narrow the population to those children at imminent risk of foster care. Governor supports the bill. The issue is the \$2 million. Cannot project the number of children who would be impacted by this bill. Local governments oppose the bill and view it as an unfunded mandate. OCS is exploring using CSA non-mandated funding. No one wants to reduce the Mental Health Initiative funding. This fixes the issue of custody relinquishment. VACSB supports the bill

- HJR 774 mental health services for children; services should be provided and funded by state's system. This resolution recognizes DMHMRSAS as the primary state agency responsible for the planning and delivery of mental health services. This resolution states that neither DSS nor CSA is the default system for the provision of mental health services.
- Kim suggested that the committee support funding for the CSBs to build capacity, if resources are put in CSBs to assist in reducing CSA costs for residential care. Charline moved that the committee include a specific and targeted recommendation for building capacity in the 2007 report, with recommendation to consider specific details in the recommendations that outline service requirements and service needs. Catherine seconded the motion. Motion passed.
- Considerable discussion occurred around SB 1332. CSA Community Collaborative Projects are intended to demonstrate that reductions in expenditures can occur when the community capacity can serve the needs of children and prevent residential placement. Comment was made that families want to keep their children at home with wrap-around services.

VIII. 2007 Committee Report

Vicki Hardy-Murrell

Recommendations as delineated in the December meeting summary:

Frame recommendations as a way to get residential costs under control
 Re-direction of dollars
 Results and outcome stories
 How to eliminate mandated/non-mandated distinction
 Capacity
 Family Support Services/Family services and supports

Volunteers for writing committee: Don, Vicki, Sandy, Pam, Jeannette, Brian, Shirley, and MAD

CSA/CSB Partnership Committee – Pam Fisher
 Substance Abuse Committee-Martha Kurgans
 Juvenile Justice-Joanne Smith
 MR/EI Committee- Mary Cole
 Autism

- Sub-committees need to meet and begin to develop recommendations and priorities for funding
- Sub-committees will use the ten-year strategic plan to guide their work

Recommendations from subcommittees	March
Draft	April
Draft Final report	May 15
Final report	June 1

Announcement: Mental Health Block Grant Funds will go out to CSBs today. Each board will receive \$45,000 in one-time funds to address infrastructure, recovery, data, and children services.

IX. Meeting adjourned.